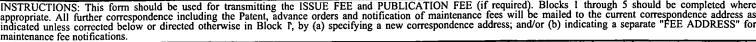
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885



| nnronriata All further | correspondence includir d below or directed oth | or the Patent advance of | rders and notification of many specifying a new corresponding to the cor | naintenance tees w | ill be maı | led to the current of | correspondence address as |
|--|--|---|---|--|--|---|---|
| CURRENT CORRESPONDE | Fee(s | Note: A certificate of mailing can only be used for domestic mailings of the rec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | | | |
| 23850 ARMSTRONG 1725 K STREET SUITE 1000 | | 72006 TOS, HANSON & | BROOKS, LLR her State | Cert by certify that this Postal Service we essed to the Mail | ificate of s Fee(s) T ith sufficients | Mailing or Transn | deposited with the United class mail in an envelope above, or being facsimile |
| WASHINGTON | , DC 20006 | / | · · · · · · · · · · · · · · · · · · · | | | 1.00 | (Depositor's name) |
| | | 2 2 1000 💆 | | | | (Signature) | |
| · | | NOV , | 8 | | | | (Date) |
| APPLICATION NO. | NO. FILING DATE | | AMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. |
| 09/044,030 | 03/19/1998 | | AKIRA UEDA | | 980400 | | 7704 |
| FITLE OF INVENTION: | | | 1 | | | · · | T. DUTTE DIVI |
| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE | FEE | OTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1400 | \$300 | \$0 | | \$1700 | 11/24/2006 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | |
| CIRIC, LJILJANA V 3753 | | 3753 | 165-104210 | | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | | |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | |
| (A) NAME OF ASSIC | | (B) RESIDENCE: (CITY and STATE OR COUNTRY 502 00000047 09044030 | | | | 9044030 | |
| FUJITSU | | categories (will not be pr | Kawasaki, | Japari U: 15 02 FC: 15 03 FC: 80 Individual XXCo | 01 04 01 rporation | or other private gro | 1490.00 OP 300.09 OP up entity • 🕮 Gövernment |
| a. The following fee(s) a | o small entity discount | b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) XX A check is enclosed. Payment by credit card. Form PTO-2038 is attached. XX The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-2340 (enclose an extra copy of this form). | | | | | |
| a. Applicant claims | us (from status indicates SMALL ENTITY statu | is. See 37 CFR 1.27. | ☐ b. Applicant is no long | | | | |
| NOTE: The Issue Fee and nterest as shown by the r | Publication Fee (if req ecords of the United Sta | uired) will not be accepte tes Patent and Trademark | d from anyone other than the Office. | ne applicant; a regis | stered attor | rney or agent; or the | e assignee or other party in |
| Authorized Signature | West 1 | Date November 22, 2006 | | | | | |
| Typed or printed name William L. Brooks | | | Registration No. 34,129 | | | | |
| This collection of information application. Confident submitting the completed his form and/or suggestion. | ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bu | FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the | on is required to obtain or re 1.14. This collection is estive depending upon the indivi- tion of the collection of the | etain a benefit by the imated to take 12 midual case. Any configuration, U.S. Patent and | ne public voluments to mments or Frademark | which is to file (and complete, including in the amount of time of Office, U.S. Department of the complete of | by the USPTO to process) g gathering, preparing, and the you require to complete rement of Commerce, P.O. |

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissi Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.